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## BIB DATA SHEET

CONFIRMATION NO. 5467

| SERIAL NUMBER   | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.            |  |
|---|---|--|---|-----------------------------------|--|
| 10/695,549  | 10/28/2003<br>RULE  | 703  | 2121  | 30018432-2                        |  |
| <b>APPLICANTS</b><br>Rycharde Jeffery Hawkes, Bristol, UNITED KINGDOM;<br>David Trevor Cliff, Southville, UNITED KINGDOM;<br>Colin Andrew Low, Wotton-Under-Edge, UNITED KINGDOM;<br><b>** CONTINUING DATA *****</b> ts 1/13/10<br><b>** FOREIGN APPLICATIONS *****</b> ts 1/13/10<br>UNITED KINGDOM 0309958.7 04/30/2003<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>01/28/2004 |   |  |   |                                   |  |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and /THOMAS H<br>Acknowledged STEVENS/<br>Examiner's Signature   | <input checked="" type="checkbox"/> Met after<br>Allowance<br>ts<br>Initials                                      | <b>STATE OR<br/>COUNTRY</b><br><br>UNITED<br>KINGDOM | <b>SHEETS<br/>DRAWINGS</b><br><br>3   | <b>TOTAL<br/>CLAIMS</b><br><br>14 | <b>INDEPENDENT<br/>CLAIMS</b><br><br>4 |
| <b>ADDRESS</b><br>HEWLETT-PACKARD COMPANY<br>Intellectual Property Administration<br>3404 E. Harmony Road<br>Mail Stop 35<br>FORT COLLINS, CO 80528<br>UNITED STATES  |   |  |   |                                   |  |
| <b>TITLE</b><br>Simulation at two different levels of complexity  |   |  |   |                                   |  |
| <b>FILING FEE<br/>RECEIVED</b><br>986   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                   |  |